



To be filed with:

e-Collect
804 Fayette Street
Conshohocken, PA 19428
(866) 225-0033

CITY OF CHESTER BPT/MERC REGISTRATION FORM YEAR 2018

Instructions & Deadline: The following registration form is required to be completed by each company with a business location in the City or any business operating within the territorial boundaries of the City. This Application is due annually no later than April 15, 2018.

This Application is separate from and does not replace the Business Privilege / Mercantile Tax Return. Please make a copy of this registration for your records. A license for your records will be mailed after payment is submitted. The license fee is \$5.00 per location and should be remitted with the tax form.

License Year: _____ Business Start Date: _____

Legal Name of Business: _____

Trade Name (d/b/a): _____

Mailing Address: _____ Physical Address: *(If different from Mailing Address)*

Telephone: _____ Fax: _____

Email Address: _____

Total Number of Employees: _____ Federal Employer Identification No.: _____

Business Location(s): _____

Business Organization Type (check one)

- Sole Proprietorship
 Partnership
 Corporation or LLC (PA Entity No. _____)
- Other _____) (Describe: _____)
 Non

I hereby certify under the penalties provided by law that all statements made herein are to the best of my knowledge and belief true, correct and complete.

Applicant's Signature: _____

Printed Name: _____

Date: _____ Telephone: _____

Make Checks Payable To:

ECOLLECT
C/O e-Collect
804 Fayette Street
Conshohocken, PA 19428

DUE DATE 4/15/18
BUSINESS PRIVILEGE AND MERCANTILE TAX
RETURN

CITY OF CHESTER - 230101
DELAWARE COUNTY, PENNSYLVANIA

Minimum tax and license due is \$20.00



(866)-225-0033
needhelp@e-collectplus.com

Please correct any error in name, address, or district.

No authority is given by issuance of this License/Permit for any activity forbidden by zoning regulations

Please include EIN or SSN: _____

No extension of payment granted.

Under Act 50 you are entitled to a written explanation of your rights pertaining to the audit, appeal enforcement, refund and collection of local taxes by calling the Township during regular business hours.

LICENSE AND REGISTRATION FEE

TAX YEAR 2018

SEPARATE LICENSE IS REQUIRED FOR EACH LOCATION)

JE DATE: 4/15/18

Table with 2 columns: Description (1. SERVICES, 2. RENTALS, 3. RETAIL BUSINESS, 4. WHOLESALE BUSINESS) and Amount (5.00, 5.00, 5.00, 5.00)

TOTAL A (Sum of lines 1, 2, 3 and 4)

ESTIMATED BUSINESS PRIVILEGE AND MERCANTILE TAX RETURN

2018 TAX YEAR

Table with 6 columns: Description, GROSS VOLUME OF BUSINESS, EXEMPTIONS & EXCLUSIONS, TAXABLE VOLUME, TAX RATE, AMOUNT OF TAX DUE. Rows include SERVICES, RENTALS, RETAIL BUSINESS, WHOLESALE BUSINESS, and TOTAL B.

FINAL BUSINESS PRIVILEGE AND MERCANTILE TAX RETURN

2017 TAX YEAR

Table with 6 columns: Description, GROSS VOLUME OF BUSINESS, EXEMPTIONS & EXCLUSIONS, TAXABLE VOLUME, TAX RATE, AMOUNT OF TAX DUE. Rows include SERVICES, RENTALS, RETAIL BUSINESS, WHOLESALE BUSINESS, and TOTAL C.

LICENSE AND TAX DUE

- 1. TOTAL LICENSE AND TAX PAYABLE (SUM OF TOTAL LINES A,B AND C)
2. LESS TAX PAID IN ADVANCE (ESTIMATED TAX PAYMENT)

TOTAL D (LINE D1 MINUS (-) D2)

PENALTY AND INTEREST

RETAIL/WHOLESALE PENALTY 10% (.1) OF TAX DUE

INTEREST 1% (.01) PER MONTH OF TAX DUE

SERVICE BUSINESS PENALTY 10% (.1) OF TAX DUE

INTEREST 1.25% (.0125) PER MONTH OF TAX DUE

OTHER(FINES, COSTS, ETC.)

TOTAL E (SUM OF LINES E1, E2, AND E3)

Check or Money Order Only

TOTAL OF LINES D AND E

APPROPRIATE BOX PAYMENT REFUND CREDIT

COMPUTATION OF GROSS VOLUME OF BUSINESS

If business commenced a full year (Jan. to Dec.) prior to current tax year, use the total gross volume of business transacted during that period multiplied by the applicable tax rate
If business commenced after Jan 1. of the prior tax year, indicate starting date () and multiply first month's gross volume of business () by 12.

If business commenced subsequent to Jan.1 of the current year, indicate starting date () and multiply your first month's gross volume of business (\$) by number of months remaining in the current tax year (), include fractional months.

If Temporary, Seasonal, or Itinerant, report actual income within seven (7) days of completion.

FIRMATION: I hereby certify under the penalties provided by law that all statements made herein and/or in any supporting schedule or exhibit are to the best of my knowledge and belief, correct and complete. If this return is prepared by a person other than the taxpayer, his declaration is based on all the information of which he has any knowledge.

nature (X) _____ Date _____ Print Name _____

_____ Phone () _____

nature of person preparing the return (if other than the above)